

**IN THE CIRCUIT COURT OF BOONE COUNTY, MISSOURI  
PROBATE DIVISION**

Matter of \_\_\_\_\_, Deceased. No. \_\_\_\_\_

**DESIGNATION OF RESIDENT AGENT**

I, \_\_\_\_\_, residing at \_\_\_\_\_,  
\_\_\_\_\_, desiring to serve as  
Affiant/Personal Representative of the above named decedent, pursuant to Sec. 473.117 RSMo.,  
hereby appoint, \_\_\_\_\_, as my  
agent for service of process upon me and for the receipt of all notices to me within the State of  
Missouri concerning said estate.

THE STATEMENTS AND REPRESENTATIONS IN THIS DOCUMENT ARE MADE  
UNDER OATH AND ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND  
BELIEF. I UNDERSTAND THEY ARE MADE SUBJECT TO THE PENALTIES OF MAKING A  
FALSE AFFIDAVIT OR DECLARATION.

Date: \_\_\_\_\_

\_\_\_\_\_  
Affiant/Personal Representative

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**ACCEPTANCE OF APPOINTMENT AS RESIDENT AGENT**

I, \_\_\_\_\_, residing at \_\_\_\_\_,  
\_\_\_\_\_, Missouri, Telephone Number \_\_\_\_\_  
\_\_\_\_\_, having been appointed pursuant to Sec. 473.117 RSMo., to act as agent for  
service of process on and receipt of notice to \_\_\_\_\_,  
within the State of Missouri, concerning the above estate, hereby acknowledge such appointment  
and consent to act as such agent.

THE STATEMENTS AND REPRESENTATIONS IN THIS DOCUMENT ARE MADE  
UNDER OATH AND ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND  
BELIEF. I UNDERSTAND THEY ARE MADE SUBJECT TO THE PENALTIES OF MAKING A  
FALSE AFFIDAVIT OR DECLARATION.

Date \_\_\_\_\_

\_\_\_\_\_  
Resident Agent